

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

RETAIL SALES PERMIT RENEWAL APPLICATION  
FOR EFT FILERS ONLY

RI IDENTIFICATION NUMBER: \_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

D/B/A: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

DUE ON OR BEFORE JANUARY 31, 2004

**ANNUAL SALES TAX RENEWAL FEE IS \$ 10.00 PER INDIVIDUAL PERMIT**

FISCAL TAX YEAR:

Beginning: July 1, 2004

Ending: June 30, 2005

NAME & ADDRESS:

**For consolidated filers only:**

Last 2 digits of RI identification number:  
(back of form may be used or attach listing)

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Please check here if new mailing address:

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**No. of permits x \$ 10.00** \_\_\_\_\_

Authorized Signature & Title

Date

Mail this form with remittance payable to: Rhode Island Division of Taxation  
One Capitol Hill  
Providence, RI 02908